

**DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION  
(37 CFR 1.63) and POWER OF ATTORNEY**

☒ Declaration Submitted with Initial Filing

**OR**

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

**Attorney Docket Number:** n/a

**First Named Inventor:** Cravaack

**COMPLETE IF KNOWN**

**Application Number:** \_\_\_\_\_

**Filing Date:** \_\_\_\_\_

**Group Art Unit:** \_\_\_\_\_

**Examiner Name:** \_\_\_\_\_

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

**APPARATUS FOR SUPPORTING MILK EXTRACTION DEVICES**

the specification of which

☒ is attached hereto

OR

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number  
\_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to the patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

**Prior Foreign Application(s)**

**Priority Not  
Claimed**

**Certified Copy  
Attached?**

\_\_\_\_\_  
(Number) (Country) (Foreign Filing Date)

☐

☐ Yes ☐ No

\_\_\_\_\_  
(Number) (Country) (Foreign Filing Date)

☐

☐ Yes ☐ No

\_\_\_\_\_  
(Number) (Country) (Foreign Filing Date)

☐

☐ Yes ☐ No

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

\_\_\_\_\_  
(Application Number) (Filing Date)

\_\_\_\_\_  
(Application Number) (Filing Date)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

DECLARATION – Utility or Design Patent Application  
and POWER OF ATTORNEY

As a below-named inventor, I hereby appoint the registered practitioners named below as my/our attorney(s) or agent(s) to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith:

Lisa A. Brzycki, Reg. No. 40,926

Direct all telephone calls to Lisa A. Brzycki at telephone number (414) 276-0977, facsimile number (414) 276-0982.

Direct all correspondence to: **Lisa A. Brzycki**  
**610 North 77<sup>th</sup> Street**  
**Wauwatosa, Wisconsin 53213**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Full name of Sole or First Inventor:**

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle [if any]) and Family Name or Surname: Traci Cravaack

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence (city, state, country): Brooklyn Park, MN, USA Citizenship: USA

Mailing Address: 8825 Stratford Crossing

(city, state, zip, country): Brooklyn Park, MN 55443, USA

**Full name of Second Inventor, if any:**

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle [if any]) and Family Name or Surname: Catherine Luciano

Inventor's Signature: Catherine Luciano Date: 8/1/01

Residence (city, state, country): Boca Raton, FL, USA Citizenship: USA

Mailing Address: 2413 NW 49th Lane

(city, state, zip, country): Boca Raton, FL 33431, USA

**Full name of Third Inventor, if any:**

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle [if any]) and Family Name or Surname: Laurie Zanotti

Inventor's Signature: Laurie A. Zanotti Date: 8/1/01

Residence (city, state, country): Hartland, WI, USA Citizenship: USA

Mailing Address: W293 N6728 Cheryl Lane

(city, state, zip, country): Hartland, WI, 53029, USA

# DECLARATION - Utility or Design Patent Application and POWER OF ATTORNEY

As a below-named inventor, I hereby appoint the registered practitioners named below as my/our attorney(s) or agent(s) to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith:

LISA A. BRZYCKI, REG. NO. 40,926

Direct all telephone calls to Lisa A. Brzycki at telephone number (414) 774-4833, facsimile number (414) 774-4837.

Direct all correspondence to: LISA A. BRZYCKI  
610 North 77<sup>th</sup> Street  
Wauwatosa, WI 53213

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## Full name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle (if any)) and Family Name or Surname: Traci Cravaack

Inventor's Signature: Traci Cravaack

Date: 7/31/01

Residence (city, state, country): Brooklyn Park MN USA

Citizenship: USA

Mailing Address: 8825 Stratford Crossing

(city, state, zip, country): Brooklyn Park MN 55443 USA

## Full name of Second Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle (if any)) and Family Name or Surname: Catherine Luciani

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Residence (city, state, country): Roca Baton FL USA

Citizenship: USA

Mailing Address: 2413 NW 49th Lane

(city, state, zip, country): Roca Baton FL 33431 USA

## Full name of Third Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first & middle (if any)) and Family Name or Surname: Laune Zanotti

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Residence (city, state, country): Madison WI USA

Citizenship: USA

Mailing Address: W283 N6728 Cheryl Lane

(city, state, zip, country): Madison WI 53029 USA

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